PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 105129-3 First Inventor Robert Condon Title TIP RESISTANT WET/DRY VACUUM

(Only for new nonprovisional applications under 37 CFR 1.53(b))													
					ess Mail Label No. EV324848148US								
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450									
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. X Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages					7. 8. 9. 10. 11. 12. 13. 14. 15.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDSVPTO-1449 Copies of IDS Statement (IDSVPTO-1449 Citations 13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.							
Fo un	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by												
	reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS												
X Customer Number: 021125						OR		Correspondence address below					
Na	NUTTER MCCLENNEN & FISH LLP Lisa J. Michaud												
Address World Trade Cer 155 Seaport Bou													
Cit	·	Boston Stat			tate	MA				Zip Code	•]	02210-2604	
Country US Telephi		elephone	(61	7) 43	39-255	0	F	ax	(617) 310-9550				
L	Name (Print/Type) Lisa J. Michaud					Regis	tration No	o. (Attor	ney/Agent)	44,238		
Signature				7. //	1	<u> </u>				Date	00	tober 16, 2003	

Name (Print/Type)	Lisa J. Michaud	Registration No. (Attorne	44,238	
Signature	Rusta		Date	October 16, 2003

EXPRESS MAIL LABEL NO.: EV324848148US Use in lieu of PTO/SB/17 (08-03) (Form updated to reflect FY 2004 fees effective 10/1/03)

SEE TO AMOUNT AT		Complet if Kn wn							
│ FEE TRANSMITTAL		Application Number				Not Yet Assigned			
for EV 2004						October 16, 2003			
for FY 2004		First Named Inventor				Robert C	ondon		
Effective 10/01/2003, Patent fees are subject to annual revision.		Examiner Name				Not Yet Assigned			
X Applicant claims small entity status. See 37 CFR 1.27		Art Unit N/A				N/A			
TOTAL AMOUNT OF PAYMENT (\$) 385.00		Attom	ey Doo	ket No	о.	105129-3	3		
METHOD OF PAYMENT (check all that apply)	T			FEE	CALCUI	ATION (co	ontinued)		
X Check Credit Money Other None	3. 4	ADDITI	ONAL	FEES			· · · · ·		
Deposit Account:									
Deposit	_	e Entity		Entity	_				
Account 141449 Number	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Desc	cription	Fee Paid	
Deposit Account Nutter McClennen & Fish LLP	1051	130	2051	65	Surcharge	- late filing fe	e or oath		
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge sheet.				
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		Non-English specification			
Charge any additional fee(s) during the pendency of this	1812	2,520	1812		_	or filing a request for ex parte reexamination			
application	1804	920*	1804	920*	Requesting	equesting publication of SIR prior to			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1.840°	Examiner a	publication of	of SIR after		
FEE CALCULATION	1251	110	2251	55	Examiner	ion for reply within first month			
1. BASIC FILING FEE	1252	420	2252	210		for reply within			
Large Entity Small Entity	1253	950	2253	475	Extension	for reply within	n third month		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension	for reply withi	n fourth month		
1001 770 2001 385 Utility filing fee 385.00	1255	2,010	2255	1,005	Extension	for reply within	n fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A	ppeal			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brie	ef in support o	of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	· .	r oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451			•	olic use proceeding		
SUBTOTAL (1) (\$) 385.00	1452 1453	110 1,330	2452 2453	55 665		revive – unav revive - uninte			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665		e fee (or reiss			
Extra Fee from	1502	480	2502	240	Design issu	•	uc,		
Total Claims 13 -20** = x = 0.00	1503	640	2503	320	Plant issue				
Independent 2 3** = V 000	1460	130	1460	130		etitions to the Commissioner			
Claims 2 0.00 Multiple Dependent =	1807	50	1807	50		rocessing fee under 37 CFR 1.17(q)			
	1806	180	1806	180					
Large Entity Small Entity Fee	8021						on Disclosure Stmt	\vdash	
Code		40	8021	40	property (ti	mes number	of properties) final rejection	<u> </u>	
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	(37 CFR 1.	129(a))			
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		dditional inve 37CFR 1.129			
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385			examination (RCE)		
1205 18 2205 9 "Reissue claims in excess of 20 and over original patent	1802	900	1802	900	of a design	r expedited ea application	xamination		
		fee (spe			5.11				
SUBTOTAL (2) (\$) 0.00 **or number previously paid, if greater; For Reissues, see above	Redu	iced by E	sasıc Fil	ing Fee	Paid	SUBTO	TAL (3) (\$)	0.00	
SUBMITTED BY						(Complete	(if applicable))		
Name (Print/Type) Lisa J. Michaud	Registi (Attorne	ration No ey/Agent)	44,	238		T	(617) 439-2550		
Signature Ruff)					Date	October 16, 200	03	